2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2012
Secretary of State

DOCUMENT# N02000004667

Entity Name: FULL GOSPEL COMMUNITY SERVICE CENTER HOLDING CORP., INC.

Current Principal Place of Business:

1904 EAST OSBORNE AVENUE
TAMPA, FL 33610

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 310836
TAMPA, FL 33680

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DOUGLAS, ROBERT J
4423 48TH STREET
TAMPA, FL 33610 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD
Name: DOUGLAS, ROBERT J
Address: 4423 48TH STREET
City-St-Zip: TAMPA, FL 33610

Title: VD
Name: DOUGLAS, ROBERT J JR.
Address: 4423 48TH STREET
City-St-Zip: TAMPA, FL 33610

Title: TD
Name: MAYLOR-CALDWELL, DEBRA
Address: 1820 E. FAIRBANKS
City-St-Zip: TAMPA, FL 33604

Title: SD
Name: HEAD, GLORIA
Address: 4812 N. 43RD STREET
City-St-Zip: TAMPA, FL 33610

Title: T
Name: CLARKE, NICOLA
Address: 14612 TURTLE CREEK CIRCLE APT 313
City-St-Zip: LUTZ, FL 33549

Title: T
Name: LARRY, PARHAM
Address: 1722DARLINGTON
City-St-Zip: TAMPA, FL 33619

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GLORIA HEAD SD 04/10/2012

Electronic Signature of Signing Officer or Director — Date